10/049711

PATENT APPLICATION SERIAL NO. _

U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE FEE RECORD SHEET

02/22/2002 MNGUYEN 00000060 194675 10049711 01 FC:970 890.00 CH

JC11 Rec'd PCT/PTO 1 8 FEB 2002

Ų.S. APPLICA	TION N	NO. (IF KNOWN, SECULER INTERNATIONAL APPLICATION NO. PCT/DE 01/01933								ATTORNEY'S DOCKET NUMBER 1936		
20. The following fees are submitted:.										CALCULATION	S PTO USE ON	LY
BASIC NATIONAL FEE (37 CFR 1.492 (a) (1) - (5)) :												
1	- Sound Responsible Order propulate of the Critical Propulation											
	\$720.00											
No international preliminary examination fee paid to USPTO (37 CFR 1.482) but international search fee paid to USPTO (37 CFR 1.445(a)(2))									00			
Neither international preliminary examination fee (37 CFR 1.482) nor international search fee (37 CFR 1.445(a)(2) paid to USPTO												
International preliminary examination fee paid to USPTO (37 CFR 1.482) and all claims satisfied provisions of PCT Article 33(2)-(4)									00			
ENTER APPROPRIATE BASIC FEE AMOUNT =										\$890.00		
Surcharge of \$130.00 for furnishing the oath or declaration later than months from the earliest claimed priority date (37 CFR 1.492 (e)).									0	\$0.00		
CLAIMS		NU	MBEF	FILED		NUMBER EXT	RA	RATE	3			
Total claims			14	- 20	=	0		x \$18.0)0	\$0.00		
Independent c	laims		1	- 3	=	0		x \$80.0	00	\$0.00		
: Multiple Dep	endent	Claims (ch								\$0,00		
TOTAL OF ABOVE CALCULATIONS =										\$890.00		
Reduction of 1/2 for filing by small entity, if applicable. Verified Small Entity Statement must also be filed (Note 37 CFR 1.9, 1.27, 1.28) (check if applicable).									\$0.00			
SUBTOTAL =									\$890.00			
Processing fee of \$130.00 for furnishing the English translation later than 20 30 months from the earliest claimed priority date (37 CFR 1.492 (f)).									\$0.00			
TOTAL NATIONAL FEE =									\$890.00			
Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31) (check if applicable).									\$0.00			
TOTAL FEES ENCLOSED =									\$890.00			
<i>g</i>										Amount to be: refunded	\$	
										charged	\$	
☐ A check in the amount of to cover the above fees is enclosed. ☐ Please charge my Deposit Account No. 19-4675 in the amount of \$890.00 to cover the above fees. ☐ A duplicate copy of this sheet is enclosed.												
The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 19-4675 A duplicate copy of this sheet is enclosed. NOTE: Where an appropriate time limit under 37 CFR 1.494 or 1.495 has not been met, a petition to revive (37 CFR												
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SEND ALL CORRESPONDENCE TO:												
STRIKER, STRIKER & STENBY 103 EAST NECK ROAD								SIGNATURE				
HUNTINGTON, NEW YORK 11743							MICHAEL J. STRIKER					
								NAME				
								27233				
								REGISTRATION NUMBER				
JANUARY								RY 1	8, 2002			
								DATE				
DATE												